

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00448696 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 08 / 2016	
Mailing Address PO Box 388			Amount 57.25	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E8736E91B7C684ED4BEA Date of Disbursement or Obligation MM / DD / YYYY 03 / 08 / 2016	
Purpose of Expenditure IE-Banks-Donation Processing		Category/ Type		
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN	
Calendar Year-To-Date Per Election for Office Sought		9836.72	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 15 / 2016	
Mailing Address PO Box 388			Amount 206.50	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EDFC1B2D97F894314B00 Date of Disbursement or Obligation MM / DD / YYYY 03 / 15 / 2016	
Purpose of Expenditure IE-Banks-Donation Processing		Category/ Type		
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN	
Calendar Year-To-Date Per Election for Office Sought		10043.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	263.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
04 / 01 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 22 / 2016	
Mailing Address PO Box 388		Amount 29.55	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EEBC72427B888418A93A Date of Disbursement or Obligation MM / DD / YYYY 03 / 22 / 2016
Purpose of Expenditure IE-Banks-Donation Processing		Category/Type	
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate
District: 03 State: IN		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		10072.77	

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 29 / 2016	
Mailing Address PO Box 388		Amount 5.32	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EF5DEB47DE266440C946 Date of Disbursement or Obligation MM / DD / YYYY 03 / 29 / 2016
Purpose of Expenditure IE-Banks-Donation Processing		Category/Type	
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate
District: 03 State: IN		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		10078.09	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	34.87
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
04 / 01 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Alliance Strategies Group Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 31 / 2016		
Mailing Address 7700 Congress Ave Ste 3208			Amount 1067.18		
City Boca Raton	State FL	Zip Code 33487-1358	Transaction ID : EF15D0C50194A48DDAF8		
Purpose of Expenditure IE-Banks-Email Marketing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate		District: 03 State: IN
Calendar Year-To-Date Per Election for Office Sought		11145.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Envision Printers/Marketing			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2016		
Mailing Address 2 Riverbend Pkwy			Amount 12322.02		
City Leesburg	State VA	Zip Code 20176-0000	Transaction ID : E4A2EA091B2A04084A19		
Purpose of Expenditure IE-Banks-Direct Mail Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate James E Banks		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate		District: 03 State: IN
Calendar Year-To-Date Per Election for Office Sought		23467.29		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13389.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	13687.82

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
04 / 01 / 2016

Signature